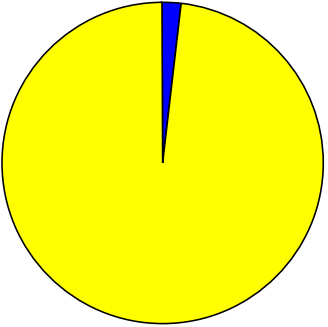


71-10-Adult/Senior Services

Fund/Agency: 001/71		Health Department
Personnel Services	\$246,689	<p style="text-align: center;">CAPS Percentage of Agency Total</p>  <p style="text-align: center;">2.0%</p> <p style="text-align: center;">98.0%</p> <p style="text-align: center;">■ Adult/Senior Services ■ All Other Agency CAPS</p>
Operating Expenses	\$475,243	
Recovered Costs	\$0	
Capital Equipment	\$6,000	
Total CAPS Cost:	\$727,932	
Federal Revenue	\$0	
State Revenue	\$158,626	
User Fee Revenue	\$33,831	
Other Revenue	\$13,685	
Total Revenue:	\$206,142	
Net CAPS Cost:	\$521,790	
Positions/SYE involved in the delivery of this CAPS	5/5	

► CAPS Summary

Adult Senior Services include the Medicaid Pre-Admission Screening (PAS) Program and Bathing Respite services. The Pre-Admission Screening Program authorizes a continuum of long-term care services available to an eligible person under the State of Virginia Medical Assistance Program. Medicaid funded long-term care services may be provided in either a nursing home or community setting.

The eligibility screening process of individuals who are seeking nursing home admission or community-based services is performed in the home by the screening team, a Health Department Public Health Nurse (PHN) and a Department of Family Services (DFS) Social Worker (SW) according to the State of Virginia Plan for Medical Assistance.

Health Department

The Bathing/Respite services are provided to adults with chronic conditions/diseases, who have bathing needs and to provide respite for caregivers and families of adults who require full-time care in the community. Services are available to adults 18 years and above, and to all residents of the County regardless of their income level.

- The In-Home Bathing Program offers personal care services to adults in their home environment who require assistance due to physical disabilities, confusion, and/or memory loss and who do not have anyone willing or able to assist them. These personal tasks may include assistance with bathing, dressing, hair and nail care, change of bed linens, meal preparation/monitoring, and ambulation/transfer assistance.
- The In-Home Respite Program provides intermittent respite services to caregivers of adults requiring continual supervision due to confusion, memory loss, and/or physical disabilities. The services can be provided in addition to the personal care services.
- The Center-Based Saturday Respite Program offers 6 hours of services in a County Adult Day Health Care Center to adults requiring continual supervision due to memory loss, confusion, and/or physical disabilities. Staffing ratio is usually 1 to 3 or 1 to 4 due to the impairment level of the clients utilizing the service. A Health Department therapeutic recreational specialist develops the activity program.

Each client/caregiver is assigned a PHN case manager in the Bathing/Respite program. The case manager evaluates the request for service, completes a home assessment and collaborates with the client/caregiver to develop a service plan. The plan is submitted to the program coordinator who arranges for services with one of the four contract Home Care agencies. The PHN case manager monthly monitors the services provided and the needs of the client. The program coordinator provides contract monitoring.

During FY 1999 and FY 2000, over 50 percent of the client/caregivers in the Bathing/Respite program were simultaneously enrolled in more than one of the three service program options. Thirty percent of these services were provided to multi-generational households. In FY 2000, in-home service hours increased by 66 percent. During this time frame, 90 percent of the clients were in the Health Department's A income level (\$0.00 per household) to D income level (\$23,220 per household).

County demographics show adult children are increasingly becoming caregivers to their frail parents while continuing to work and care for their own children. Aging parents are now seeking help to assist with caring for their disabled adult child in the home. This reflects the number of County families following the national trend to keep their loved ones at home versus institutionalized.

► **Method of Service Provision**

The request for a nursing home pre-admission screen is received by DFS. A social worker coordinates the home visit assessment with a PHN and the family/caregiver, usually Monday through Friday, 8:00 a.m. to 4:30 p.m. Following the assessment, the screening packet is submitted to the Health Department's medical officer for signature. A formal letter notification of the outcome of the home visit assessment is sent to the family. Medicaid-funded long-term care services are coordinated by the SW.

Health Department

The Bathing and Respite Programs provide services through a joint Home Based Care contract with the Department of Family Services with four Home Care agencies.

Bathing services are available Monday through Friday between 8:00 a.m. to 5:00 p.m., two hours per visit (some flexibility is available outside of these hours). Care is typically offered two to three times a week.

In-Home Respite services is available Monday through Sunday, usually 4 to 6 hours per visit between 8:00 a.m. and 9:00 p.m. Care is typically offered two to three times a week.

The Center-Based Saturday Respite program rotates by schedule between the Lewinsville and the Lincolnia Centers, 10:00 a.m. and 4:00 p.m.

► Performance/Workload Related Data

Title	FY 1998 Actual	FY 1999 Actual	FY 2000 Actual	FY 2001 Estimate	FY 2002 Estimate
Pre-Admission Medicaid Screening					
Clients screened	268	269	281	285	285
Nursing home	92	75	89	85	85
Personal Care	106	120	118	120	120
Adult Day Health Care	8	3	10	12	12
ADHC and Personal Care	26	27	22	23	23
Respite Care	0	1	1	5	5
PAS	0	3	6	5	5
Denials	36	40	35	35	35
Dementia/Respite Program					
In-home bathing/respite clients per year	63	148	168	200	250
Center-based clients per year	33	43	46	50	50
In-home service hours	1,714	8,389	12,619	18,000	23,000
Center-based program service units	307	234	253	350	300

Health Department

► Mandate Information

This CAPS is Federally or State mandated. The percentage of this CAPS' resources utilized to satisfy the mandate is 76 - 100%. The specific Federal or State code and a brief description of the code follows:

- Code of Virginia 32.1-330, 32.1-123. Medicaid pre-admission screening is a State mandated service.

► User Fee Information

Subobject Code	Fee Title	FY 2002 ABP Fee Total
0671	Reimbursement of Personal Care	\$32,607
Current Fee		Maximum Allowable Fee Amount
Bathing and Respite Services: Health Department's sliding fee scale based on the client and/or spouse's annual income according to the State Health Department's income levels chart for determining eligibility for health services.		<u>In-Home Bathing/Respite Services:</u> <ul style="list-style-type: none"> • Ranges: low income-\$0.00 to full fee-\$12.50/hour. <u>Center-Based Respite Services:</u> <ul style="list-style-type: none"> • Ranges: low income-\$8.00 to full fee \$61.00/day Medicaid \$45.00/day
Purpose of Fee: Bathing and Respite fees are used to offset cost of providing the service.		
Levy Authority	Requirements to Change the Fee	Year Fee Was Last Adjusted
Health Department	Yearly review of fee structure.	2001
Other Remarks:		

Subobject Code	Fee Title	FY 2002 ABP Fee Total
0679	Fees - Dementia Care	\$1,224
Current Fee		Maximum Allowable Fee Amount
N/A		N/A
Purpose of Fee: The majority of this program is contracted out. Only some Saturday fees are included here.		
Levy Authority	Requirements to Change the Fee	Year Fee Was Last Adjusted
Health Department	Yearly.	N/A
Other Remarks: Health Department has increased the Center-Based Saturday Respite Program fee by 2 percent for the past two years and will continue to examine the fee on a yearly basis.		